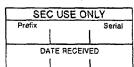
FORM D

1354677

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

### FORM D

OMB APPROVAL
OMB Number: 3235-0076
Expires:
Estimated average burden
hours per response.....16.00



# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE RECEIVED
A. BASIC IDENTIFICATION DATA	( ) 日記3 17 Z005 分分
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Phoenix Coal Corporation	203/49
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
1215 Nebo Road, Suite A, Madisonville, KY 42431	(270) 821-0993
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code) (270) 821-0922
Brief Description of Business	
Coal recovery business	PROCESSED
Type of Business Organization    corporation   limited partnership, already formed   other (p   business trust   limited partnership, to be formed	please specify): FEB 2 8 2006
Month Year Actual or Estimated Date of Incorporation or Organization: Month Year  Actual or Estimated Date of Incorporation or Organization: Organization: Organization: Organization of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	THUIVIOUN FINANCIAL
ATTACHM LT PARAMETERS ON TO	

#### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- Attention -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Lm

			a. Basic idi	ENTE	FICATION DATA				The second secon
2. Enter the information re	quested for the fo	lowin	g:						
<ul> <li>Each promoter of t</li> </ul>	he issuer, if the is	suer h	as been organized w	rithin	the past five years;				
• Each beneficial ow	nor having the pow	er to v	ote or dispose, or di	rect th	e vote or disposition	of, 10	% or more o	fa clas	s of equity securities of the issuer.
<ul> <li>Each executive off</li> </ul>	icer and director o	f corp	orate issuers and of	corpo	rate general and ma	naging	g partners of	partne	rship issuers; and
<ul> <li>Each general and r</li> </ul>	nanaging partner o	f part	nership issuers.						
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner	Ø	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, i Curtis D. Bartlett	f individual)					<del></del>			
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	ode)				····	
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, i Timothy G. Fogarty	f individual)				***************************************				
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	ode)		·			
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, i John McBride	f individual)								
Business or Residence Addre	ss (Number and	Street	, City, State, Zip Co	ode)					
1215 Nebo Road, Suite A	, Madisonville, F	Y 42	431						
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner	<b>Ø</b>	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, i Ron D. Miller	f individual)								
Business or Residence Addre 1215 Nebo Road, Suite A			, City, State, Zip Co 2431	de)					
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, i David A. Wiley	f individual)								
Business or Residence Addre	ss (Number and	Strect	, City, State. Zip Co	de)				· · · · · · · · · · · · · · · · · · ·	
1215 Nebo Road, Suite A	, Madisonville, I	(Y 42	2431						
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i MHI Energy Fund	f individual)								
Business or Residence Addre Suite 350, 300-5th Avenu			, City, State, Zip Co rta Canada T2P 3						
Check Box(es) that Apply:	Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i Morrissey Hawthorne	f individual)								aan een fan in in de fan de de Marie en de de Stade de S
Business or Residence Addre Suite 350, 300-5th Avenu			, City, State, Zip Co ta Canada T2P 3					_	

					B. II	NEORMAT	ION ABOU	T OFFERI	NG .					
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No <b>⊠</b>				
	Answer also in Appendix, Column 2, if filing under ULOE.									400				
2. What is the minimum investment that will be accepted from any individual?									J	0,000.00				
3.	Does the offering permit joint ownership of a single unit?							Yes	No <b>⊠</b>					
4.	commis. If a pers or states	sion or simi on to be lis , list the na	ilar remune: ted is an ass	ration for s ociated pe roker or de	solicitation erson or age ealer. If me	of purchasent of a broker ore than five	ers in conne cer or deale e (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	curities in t EC and/or	irectly, any he offering. with a state ons of such			
	l Name (I ne.	Last name	first, if indi	vidual)										
		Residence	Address (N	umber and	d Street, C	ity, State, Z	(ip Code)							
	H.i.			,										
Nai	me of Ass	sociated Br	oker or Dea	ıler										
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers							
	(Check	"All States	" or check	individual	States)	**************		*************	************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*************	All States		
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	MS OR WY	MO PA PR	
Ful	l Name (l	Last name	first, if indi	vidual)			<del></del>			***************************************				
Bus	siness or	Residence	Address (N	lumber an	d Street, C	City, State,	Zip Code)							
Nar	ne of Ass	ociated Br	oker or Dea	ler										
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers							
	(Check	"All States	" or check i	individual	States)			•••••	·····	**********	••••••	☐ All	States	
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR	
Ful	l Name (I	Last name i	first, if indi	vidual)									***************************************	
Bus	iness or	Residence	Address (N	lumber an	d Street, C	Sity, State, 2	Zip Code)	. <del> </del>		······································				
Nan	ne of Ass	ociated Bro	oker or Dea	ler						113111111111111111111111111111111111111				
Stat			Listed Has					and the second s	**************************************				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(Check	"All States	" or check i	ndividual	States)	***********	**>************	• • • • • • • • • • • • • • • • • • • •	••••••		•••••	☐ All	States	
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR	

## C. OFFERING PRICE NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0," if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Debt	\$	\$
	Equity	2,500,000.00	\$ 1,000,000.00
	☑ Common ☐ Preferred		
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)		
	Total	2,500,000.00	\$_1,000,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	1	§ 1,000,000.00
	Non-accredited Investors		s
	Total (for filings under Rule 504 only)	-	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
_	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ 2,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	[21	2,000.00

	C. OFFERING PRICE, NUMBER (	OF INVESTORS, EXPENSES AND USE OF PI	(OCEEDS	
	b. Enter the difference between the aggregate offering properties and total expenses furnished in response to Part C — Quest proceeds to the issuer."	tion 4.a. This difference is the "adjusted gross		\$2,498,000.00
5.	Indicate below the amount of the adjusted gross proceed each of the purposes shown. If the amount for any pur check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C—	pose is not known, furnish an estimate and ayments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	<del></del>	•	
	Purchase of real estate		] \$	<u></u> \$
	Purchase, rental or leasing and installation of machiner and equipment		2.5	□\$
	Construction or leasing of plant buildings and facilities	<del></del>	•	
	Acquisition of other businesses (including the value of offering that may be used in exchange for the assets or issuer pursuant to a merger)	securities involved in this securities of another		
	Repayment of indebtedness	<del></del>	•	_
	Working capital			
	Other (specify):			
			] \$	
	Column Totals		\$ 0.00	S 2,498,000.00
	Total Payments Listed (column totals added)		<b></b>	498,000.00
	D	FEDERAL SIGNATURE		
igi	e issuer has duly caused this notice to be signed by the undenature constitutes an undertaking by the issuer to furnish the information furnished by the issuer to any non-accredite	to the U.S. Securities and Exchange Commiss	ion, upon writte	
SSI	uer (Print or Type) Sign	nature D	ate	
Ph	oenix Coal Corporation	W. My	2.9.	06
Var	me of Signer (Print or Type)  Titl  DEVID WILEY	e of Signer (Print or Type)		
		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	• • •	262 presently subject to any of the disqualification		Yes	No <b>⊠</b>
	·	See Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertak D (17 CFR 239.500) at such times as re	ces to furnish to any state administrator of any state required by state law.	in which this notice is	filed a no	tice on Form
3.	The undersigned issuer hereby undertal issuer to offerees.	kes to furnish to the state administrators, upon w	ritten request, informa	ition furn	ished by the
4.	limited Offering Exemption (ULOE) of	the issuer is familiar with the conditions that mu f the state in which this notice is filed and underst tablishing that these conditions have been satisfie	ands that the issuer cla		
	uer has read this notification and knows the thorized person.	e contents to be true and has duly caused this notice	e to be signed on its beh	alf by the	undersigned
Issuer (	Print or Type)	Signature	Date		
Phoenis	x Coal Corporation	1 20	2.11	. 06	
- HOSHI		Title (Print or Type)			

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.